MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S)	10/562917

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15	1						65						
16		1					66						
17		1					67						
18		1					68						
19		1					69						
20		2					70						
21		2					71						
22	1	2					72						
23	1						73						
24		1					74						
25		1					75						
26		1					76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2						TOTAL IND.						
TOTAL DEP.	13						TOTAL DEP.						
TOTAL CLAIMS	15						TOTAL CLAIMS						

PTO - 1360 (REV. 11/84)

U.S. DEPARTMENT of COMMERCE
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